File Number:	<del></del>
84-1971	
For the reporting period ended December 312001	



## U2U23062 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APF	PROVAL
OMB Number:	3235-0337
Expires:	July 31, 2003
Estimated averag	e burden
hours per full resp	onse6.00
Estimated averag	e burden
hours per interme	diate
response	1.50
Estimated averag	e burden
hours per minimu	ım
response	50

	FOF	RM TA-2		
// **	I FOR REPORTING ACT			
R 2 7 2002	ON: INTENTIONAL M CONSTITUTE FE See 18 U.S.C. 1001	DERAL CRIMINA	AL VIOLATION	
Eull name of Registrant as	s stated in Question 3 of Form	TA-1:		
Seligman Quality N	Municipal Fund, Inc.			
a. During the reporting p (Check appropriate bo	period, has the Registrant engagox.)	ed a service company to	o perform any of its t	ransfer agent funct
X All	☐ Some	☐ None		
Name of Transfer Ag			File No. (begi	nning with 84- or 85- )
Seligman Dat	a Corp.		84-1895	· · · · · · · · · · · · · · · · · · ·
Seligman Dat PFPC	a Corp.		84-1895 84-1761	
	a Corp.			PROCESS
<u> </u>	a Corp.			
<u> </u>	a Corp.			
<u> </u>	a Corp.			JUL 1 0 200
PFPC	eriod, has the Registrant been e	engaged as a service co	84-1761	JUL 1 0 200 THOMSON FINANCIAL
During the reporting p	eriod, has the Registrant been e	engaged as a service co	84-1761	JUL 1 0 200 THOMSON FINANCIAL
During the reporting p transfer agent function  Y  If the answer to subsect Registrant has been en	eriod, has the Registrant been e	] No e(s) and file number(s)	mpany by a named to	JUL 1 0 2000 THOMSON FINANCIAL ransfer agent to per
During the reporting p transfer agent function  Y  d. If the answer to subsect Registrant has been en	eriod, has the Registrant been ens?  Tes   Taxition (c) is yes, provide the namel agaged as a service company to the Supplement to Form TA-2.)	] No e(s) and file number(s)	mpany by a named transfe functions: (If more	JUL 1 0 2000 THOMSON FINANCIAL ransfer agent to per er agent(s) for whice room is required, p
During the reporting p transfer agent function  Y  d. If the answer to subsect Registrant has been encomplete and attach the	eriod, has the Registrant been ens?  Tes   Taxition (c) is yes, provide the namel agaged as a service company to the Supplement to Form TA-2.)	] No e(s) and file number(s)	mpany by a named transfe functions: (If more	JUL 1 0 2000 THOMSON FINANCIAL ransfer agent to per er agent(s) for whice room is required, p
c. During the reporting p transfer agent function  Y  d. If the answer to subsect Registrant has been encomplete and attach the	eriod, has the Registrant been ens?  Tes   Taxition (c) is yes, provide the namel agaged as a service company to the Supplement to Form TA-2.)	] No e(s) and file number(s)	mpany by a named transfe functions: (If more	JUL 1 0 200 THOMSON FINANCIAL ransfer agent to per

3.	. s <sub>i</sub> <b>a.</b>	Comptroll Federal De Board of	ppropriate reguer of the Curre eposit Insuranc Governors of the and Exchange	ncy e Corporations e Federal R	on eserve Syste	(Check one bo	x only.	)			
	b.					led Form TA-l omplete, or mis				wing the date on box.)	which
			amendment(s) to file amendm able	nent(s)							
	c.	If the answer t	to subsection (t	o) is no, pro	vide an expl	anation:	<u></u>	·			
_	-										
			-	•	-	4-11 below					
4.	Νu	mber of items r	eceived for trai	aster during	the reportin	ig period:		••••••	****************	······	
5.	a.					including accor irect purchase p					<del></del>
	b.	Number of ind as of December				stment plan an					
	c.	Number of ind	ividual securit	vholder DRS	S accounts a	s of December	31:				
	d.	Approximate p December 31:									as of
		Corporate	Corporate	C	pen-End	Limited	1	Municip	al Debt	Other	٦
		Equity Securities	Debt Securities	(	ovestment Company Securities	Partnersh Securitie		Secur	ities	Securities	
										,	
6.	Nu	mber of securiti	es issues for w	hich Registr	ant acted in	the following	capacit	ies, as of	December 31	:	
				1	porate urities	Open-End Investment Company	Part	mited tnership curities	Municipal Debt Securities	Other Securities	
				Equity	Debt	Securities					
	a.	Receives items and maintains securityholder	the master			•					
	b.	Receives items	for transfer							<del> </del>	1
		but does not m master security									
	c.	Does not receive	ve items for								1
		transfer but ma master security									

/.		ope of certain additional types of activities performed:  Number of issues for which dividend reinvestment plan and/or direct purchase plan
,	b. c.	Number of issues for which DRS services were provided, as of December 31:  Dividend disbursement and interest paying agent activities conducted during the reporting period:  i. number of issues
		ii. amount (in dollars)
8.	a.	Number and aggregate market value of securities aged record differences, existing for more than 30 days, as of December 31:
		Prior Current Transfer Agent(s) Transfer Agent (If applicable)
		i. Number of issues
		ii. Market value (in dollars)
	b.	Number of quarterly reports regarding buy-ins filed by the Registrant with its ARA (including the SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2):
•	c.	During the reporting period, did the Registrant file all quarterly reports regarding buy-ins with its ARA (including the SEC) required by Rule 17Ad-11(c)(2)?
		☐ Yes ☐ No
	d.	If the answers to subsection (c) is no, provide an explanation for each failure to file:
9.	a.	During the reporting period, has the Registrant always been in compliance with the turnaround time for routine items as set forth in Rule 17Ad-2?
		☐ Yes ☐ No
		If the answer to subsection (a) is no, complete subsections (i) through (ii).
	*	i. Provide the number of months during the reporting period in which the Registrant was not in compliance with the turnaround time for routine items according to Rule 17Ad-2.
		ii. Provide the number of written notices Registrant filed during the reporting period with the SEC and with its ARA that reported its noncompliance with turnaround time for routine items according to Rule 17Ad-2.
10.		nber of open-end investment company securities purchases and redemptions (transactions) excluding dividend, interest distribution postings, and address changes processed during the reporting period:  Total number of transactions processed:
		Number of transactions processed on a date other than date of receipt of order (as ofs):

During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search
		·

Number of lost securityholder accounts that have been remitted to states during the
reporting period:

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:	Title: Assistant Secretary
12-15-5	Telephone number: (212) 850-1613
Name of Official responsible for Form: (First name, Middle name, Last name)	Date signed (Month/Day/Year):
Brian D. Simon	March 25, 2002

File Number	Supplement to Form TA-2	
For the reporting period ended December 31,	Full Name of Registrant	
Use this schedule to provide the	name(s) and file number(s) of the named tran	asfer agent(s) for which the Registrant has been

engaged as a service company to perform transfer agent functions: